IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A DES MOINES, IA 50319

Fax: (515)281-4073 www.iowa.gov/ethics

Reset Form

lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowe Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

FORM-GB

Gift or Bequest information received by a department or accepted by the Governor on behalf of the state

indexed	For office use only
Compute	r

Iowa Governor's Office	
Name of Department or Office 1007 B Grand Ave	Des Moines, IA 50319
Mailing Address	Sity, State, Zip Code
Area Code & Telephone No.	
ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OF	F CE:
Michael Boal	
Name	
Mailing Address (if different from above) michael.boal@iowa.gov	City, Stale, Zip (if different from above)
Email Address	Area Code & Telephone Number (if different from above)
John Billingsley Sunfinity Solar LLC Name 17300 Dallas Pkwy Ste 2020 Dallas, TX 75284 Mailing Address City, State, Zip Code 972-908-9069 Area Code & Telephone Number Email Address (optional) Provide a description of the gift or bequest and purpose thereof:	January 18, 2019 \$15.00 Date of Gift or Bequest Amount/Value* *value is defined as "fair market value" of item as determined by receiving department or office. If no value mark *0,00*.
Box of Enstrom toffee and confectionary Criteria to use this form:	
Receipt of any gift or bequest that is received by any department of it	is state or received by the Governor on behalf of the state.
atement of Affirmation:	
Michael Boal	

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January 29, 2019 b

Date